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ABSTRACT

The development and refinement of the Preservation, Accommodation, and Repatterning model (PAR) took place over a 10-year period. This paper presents a discussion of the evolution of PAR. The paper describes the observations and the line of empirical research findings that guided conceptualization and evaluation of the model. The model was developed based on the affective tone of counseling sessions and cross-cultural interactions which make up the three components of the model: preservation, accommodation, and repatterning. The structured use of well-defined traditional microcounseling skills are detailed, as are the limitations of the model. The use of the PAR model in the development of guidelines for the negotiation of diversity within training programs is discussed. PAR guidelines were developed in recognition of the real, day-to-day, life experience of minority clients, faculty, internship site-staff, and counselor trainees who often engage in futile attempts to attend to issues of power differences and feelings of alienation that can occur within counseling relationships and within the training environment. The model's view of human nature is likewise explored, including its basic characteristics, its therapeutic goals, the role and function of the therapist within the PAR model, the relationship between the therapist and the client, and the application and limitations of the PAR model. (MKA)

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Running Head: Multicultural Counseling and Development

PAR--A Theoretic Model for Self-Assessment and Practice toward Multicultural Counseling Competence

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PAR--A Theoretic Model for Self-Assessment and Practice

toward Multicultural Counseling Competence

Introduction

The process of development and refinement of the PAR model over a 10 year period will be presented. The observations, in general, and multicultural counseling training and the line of empirical research findings that guided the conceptualization and evaluation of the model will be discussed. The affective tone of counseling sessions and cross-cultural interactions are guided by each of the three components of the Model: Preservation, Accommodation, and Repatterning. These concepts originate from the literature and model addressing Transcultural Caring. Though the terms are the same, the concepts are behaviorally defined and serve as tone indicators for counselor responses. A description of the structured use of well-defined, traditional microcounseling skills, will be provided and model limitations addressed.

In addition, the presenter will address the use of the PAR Model in the development of Guidelines for the negotiation of diversity within training programs. Though we acknowledge that many among us continue in a more traditional view of counseling theory and practice, we often miss the other points of diversity that exist among us in terms of embracing culture as an important factor in our profession. Some of us are effective in the development of multicultural counseling theory and research, but remain ineffective in practice with clients. Some are effective in effectively implementing theory into practice with clients, but are less competent in the development and maintenance of effective working alliances with culturally different colleagues. Some have effectively developed and maintained effective working alliances with

culturally different colleagues, and not as competent in working with culturally different clients. Few of us may be able to do all three. PAR guidelines were developed in recognition of the real, day to day, life experiences of minority clients, faculty, internship site staff, and counselor trainees in often futile attempts to attend to issues of power differences and feelings of alienation that can occur within counseling relationships and within the training environment.

Experiences of faculty and trainees within training settings that require a collective, programmatic voice in attending to expected "cultural collisions" (Steward, Gimenez, Jackson,1995) among colleagues will be discussed. Strategies for decreasing the probability of the occurrence of "cultural collisions" and procedures developed to mediate collisions among faculty, staff, and trainees will be described. This work indicates one attempt to move multicultural counseling competence to a required level of day to day sensitivity and interpersonal competence in attending to points of diversity existing among colleagues within the profession of Counseling Psychology. To assist clients with our knowledge and not move ourselves to a higher level of awareness as a profession, nor challenge ourselves beyond status quo would be a travesty in our efforts to engage in social change agent activity. The PAR Model is one guide for attending to both service delivery and to one another as colleagues in the profession of counseling.

Historical Background

The development and refinement of the PAR Model evolved over a period of 12 years of being a racial ethnic minority group, female faculty member who has been responsible for facilitating the development of counselor trainees' basic counseling and multicultural counseling competence. My faculty position allowed me the opportunity to observe and be a part of the development of master and doctoral level counselor-trainees' counseling competency from

enrollment to graduation. Observing the disappearance and/or significantly diminished counseling competency of trainees confronting diversity related issues stimulated the thinking that led to the development of the PAR Model.

The PAR Model was initially developed as a strategy for practitioners: to recover basic counseling competency when confronted with client issues or client 'person' variables that are contrary to the values, attitudes, and life experiences of the counselor; and/or maintain basic counseling competency when clients' responses or behaviors during and outside of the session reflect beliefs, attitudes, and values that violate the 'person' of the counselor. It has evolved into a model of interacting with clients and peers to decrease the probability of the interpersonal recoiling that is often associated with 'cultural collisions'. This approach acknowledges the coexistence within each human interaction (i.e., counseling session) of the "shared human experience" and well-defined cultural norms existing within the profession, within general society, within the immediate living environment (i.e., family of origin, immediate household, social support network, members within the work setting), within the counselor, and within the client. Each of which may or may not overlap.

Key Concepts

View of Human Nature

Human beings, as individuals and members of a group sharing values and/or physical characteristics, have the capacity for good and evil in each of four basic domains: 1) toward self; 2) toward significant others; 3) toward members of the same group; and, 4) toward members of other groups. Though the degree to which they engage in either of these behaviors within either of these domains may be based upon early childhood experiences or active learning and exposure

to models, each individual has the potential for choice with increased awareness and exposure to alternatives.

However, even after exposure, individuals may or may not choose to engage in the behaviors that are best for themselves, best for others, best for same group members, or best for other group members. Because socially sanctioned and taboo behaviors are associated with each cultural domain, attempting to do what is best in either of the domains has the potential to create psychological, interpersonal and inter-group tensions. Given that human beings are born with the potential for rational and irrational thinking, and productive and unproductive behaviors, the degree to which the cultures across each domain conflicts significantly influences the degree to which interpersonal or intrapersonal tensions are experienced.

Though circumstances may differ for each individual and though some individuals may have more alternatives with a greater number of optimal outcomes than others, being trapped in moments of 'choice' can result in confusion, indecisiveness, and anxiety related to self- and other-induced guilt. Nevertheless, the final decision to choose among all possible responses rests with the individual. Heightened tensions related to individuals' attempts to ineffectively negotiate relationships within one or across the four domains characterize many presenting problems for those seeking therapy.

Basic Characteristics

The acronym, PAR, indicates the primary objective of the strategy: involving the client as a 'powerful other' in the therapeutic alliance who, like the counselor, is worthy of being heard, a part of a collective of the human experience, yet simultaneously unique, and capable of making powerful and informed choices that will influence his or her sense of self, the lives of significant others, the lives of shared group members, and the lives of the group members of other groups.

Emphasis is placed on the belief that the client will experience a sense of responsibility and power by collaborating with the counselor in developing an accurate perception of self as an individual and in relationship to others; and in the generation of multiple alternative responses and perspectives with associated positive and negative consequences for each. Identifying the recipient of the greatest benefit of the clients' final decision-making assists the client in developing an accurate perception of self as an individual and in relationship to others.

PAR is: psychoanalytic, in that it acknowledges an influence of early childhood experiences, and the existence of unconscious processes and ego defenses that are developed to control anxiety; existential, in that it is primarily present and future oriented with an emphasis on self-awareness before action; person-centered, in that it acknowledges each individual's capacity to self-direct within the parameter framed by unique life circumstances; and cognitive-behavioral, in that increased awareness of how cognition and behaviors interact influence decision-making related to self and to self in relationship to others.

PAR, however, does not acknowledge: the influence of the integration of psychosexual stages of development (psychoanalytic); that individuals are motivated by social interest and by finding goals toward which to strive (Adlerian); that mental health is a congruence of ideal self and real self client-centered; that there exists a set of stable "irrational" set of beliefs or behaviors (cognitive-behavioral).

The PAR Model is based on the premise that we do not clearly understand the complexity of the unique experiences of personality development across all people; that we do not clearly understand the complexity of the possible sources of motivation nor the process of goal setting across all people; and that what is considered "irrational" or "rationale" in one domain, may, in fact, not be so in another.

Mental health is the state that includes all of the following conditions: 'knowing' self and the degree and how one contributes to current life circumstances; acknowledgment of the status of self in relationship to significant others, acknowledgment of the status of self in relationship to same group members, and the acknowledgment of the status of self in relationship to other group members; the existence of effective use of this self-knowledge in developing self-care activities; and, the existence of effective coping strategies in order to be most comfortable with whom one has chosen to be in relationship to self and in relationship to others.

Optimal levels of mental health occur in life environments wherein individuals engage in behaviors and thinking that are satisfactory to self, sanctioned by significant others, sanctioned by same group members, and other group members. The degree to which mental health is diminished is based upon the degree to which individuals have not most clearly identified internal and external means of attending to response differences originating from each of the four domains. The goal of therapy is to assist clients in this process of identifying these internal and external means of coping.

The Therapeutic Process

Therapeutic Goals

Therapy is the process of assisting the client to: develop an accurate portrait and understanding of self as an individual in relationship to the presenting problem; develop an accurate portrait and understanding of self in relationship to others (i.e., significant others, same group members; other group members); identify current responses to existing points of conflict within and across each of the domains (i.e., self, significant others, same group members, other group members); develop a comprehensive understanding of the positive and negative consequences associated with each response; identify untested responses to the existing point or

points of conflict and related positive and negative consequences; and finally, assisting the client in identifying internal and external resources necessary to maintain self with increased awareness of one's status across domains and the result of the chosen response set.

Therapist's Function and Role

To accomplish the above, the role of the therapist is to : **preserve** the client's perception of his or her experience and assist in the development of the most accurate and comprehensive portrait of the client's experience; **accommodate** the client by connecting with his or her humanness and encouraging discussion of his or her uniqueness in experience; and, **repattern** the client's current response patterns by working together to identify the consequences of present client behaviors and generating untested alternative responses with other outcomes. There terms must be reflected in not only the content of the words expressed by the counselor, but also in the tone and manner. The spirit of the counselor's demeanor must be one of self- and other-acceptance no matter what the presenting issue is and no matter what the client's final decisions are.

The recommendation for the use of these concepts in an orderly manner, (from preservation to repatterning), is based upon my observations made over several years of trainees' level of counseling competency development prior to PAR training. First, trainees' tended to be respectful and sensitive to those whom they liked. In addition, they would also tend to immediately move toward problem resolution, circular talk, or silence with those with whom they were less comfortable. Second, trainees either minimized the client's experience by over identification, by under identification, or total withdrawal by immediate recommendation for referral. Third, trainees believed that it was their goal to change the client and became frustrated when the client did not behave in the manner that they 'should have'. This occurred even when

the counselor began with respect and empathy for the client's presenting problem; however, this respect and empathy was sometimes contingent on the degree to which the client moved toward 'health', as defined by the counselor, in a timely manner.

Adherence to the concept of preservation commits the counselor to first focus on understanding the client's complete experience and assisting the client to do the same. Having a commitment to assisting the client to see themselves most clearly in relationship to self and others, (including the counselor), avoids any tendency to move toward withdrawal or toward the process of immediate and premature problem resolution. The primary microcounseling skills associated with this counselor role are open ended questions, directives, paraphrasing, reflection of content, and attention to affect.

The concept of accommodation allows the counselor the opportunity to consider points of similarity with the client and to allow the client to inform the counselor of their perception of the uniqueness of their experience. This two-prong strategy of attending to difference challenges the counselor to identify with the client's dilemma, and respect the client's unique experience by inviting them to provide a more detailed description of their story. Doing so avoids any propensity to over-identify or under-identify with the client's unique experience. The primary microcounseling skill associated with this counselor role is the use of self.

The concept of repatterning allows the counselor the opportunity to work collaboratively with the client to generate alternative perspectives of the current situation, in addition to identifying additional responses to the situation. The client assists in this process and makes the final decision about what to do after fully understanding the consequences to self and to others. The role of the counselor is one of facilitator in brainstorming strategies for self-care in light of the final decision. The counselor understands that the client is a freewill agent within

the parameters of their unique life circumstances. The role of the counselor is to assist the client in making the most informed choices in decision-making related to self, to significant others, to others sharing group membership, and to others who do not share group membership. The microcounseling skills primarily associated with this role of the counselor are the identification of assumptions and reframing.

There is an additional role for the most informed and well-connected counselor that is not a part of the counseling session, but may be part of the counseling relationship: client advocate. In this role the counselor responds to a client's expressed interest or request for assistance to alter or expand the parameters of their current life experience. Such a counselor will serve as a liaison between community services and the client by identifying resources, and instructing the client in ways to successfully access such resources.

PAR is: person-centered in that the counselor, through preservation and accommodation, provides a safe climate conducive to clients' self-exploration; existential, in that the counselor's role is to help people see that they are free, at least within the parameters of their current life circumstances (repatterning); psychoanalytic, in that through repatterning, the unconscious becomes conscious; and, reality-based in that the expected outcome is the enhanced understanding of self as a separate entity and as self in relationship to others. Counselor competency requires: a commitment to the underlying philosophy of the model, the ability to effectively use basic microcounseling skills, an optimal level of social competency, self-awareness across each of the domains indicated above, behavioral and cognitive flexibility in response to others, and emotional objectivity that allow the use of self knowledge, life experiences, values, attitudes, and beliefs, in a manner that will expand clients' repertoire of responses in the face of dilemmas.

Relationship between Therapist and Client

The therapeutic relationship evolves from one in which the counselor encourages the client toward center stage in the telling of their story toward one that becomes more and more collaborative as the relationships progresses. Stage 1 consists of the counselor presenting the cultural norms of counseling and invites the clients' comments and exploration of ways the counselor and client might work together to mediate the congruency and the incongruency between who the client is naturally and what typically occurs in counseling. This begins a tone of inviting involvement which should inform and teach the counselor and move the client into a seat of assuming responsibility. Stage 2 consists of the counselor encouraging the client toward a deeper understanding of the presenting dilemma. This is done through the counselors assisting the client toward a specific identification, clarification, and comprehensive description of the presenting dilemma in relationship to self and others. Stage 3 consists of the counselor and client working together toward the generation of alternative perspectives of the dilemmas, responses, and associated positive and negative consequences in relationship to self and others. Stage 4 consists of a review of the process and outcome and assisting the client in seeing the utility of the process outside of the counseling relationship. Though the process is presented in stages, readers must note that these stages may not be linear, have no specific associated time frame, and at times may be circular in nature based on the values, needs, personality, and presenting dilemma of the client.

The therapeutic relationship is: existential in nature in that the therapist's main task is to accurately grasp clients' being in the world; transactional in that the intent is to de-emphasize the

status of the therapist; and, client-centered in that the relationship is of primary importance. The unique component is the focus on the self in relationship to others.

Applications of PAR to Client Populations

This Model was specifically developed for counseling clients who are different culturally, racially, or ethnically from the counselor. However, the strategy has been used by counselors working with client populations that they have identified in anecdotes as the most challenging in terms of personality or in terms of presenting problems. In a pre-post-test study of the effect of PAR training on twenty-four masters and doctoral-level counselor-trainees' responses to 'clients' identified by the trainees as most challenging, post-training counselors engaged significantly moreso ($p<.05$) in: **accommodating or connecting responses**, **responding to clients' questions**, engaging in **use of self** responses, **identifying assumptions**, and **attending to affect** than prior to training. Trainees identified the following as challenging client issues and types: physically and emotionally abusive partners, gay and lesbian clients with relationship problems, court referred clients, clients who do not value the work ethnic (unemployed by choice), battered women, someone contemplating an abortion, clients who abuse substances, religious clients, clients who consistently make external attributions to explain their problems, and clients who abuse children physically or sexually. After PAR training, it appears that counselor trainees were more attentive and more personally engaged with clients.

In addition, each pair of the twenty-four counseling transcripts were reviewed by five senior members of the profession, three with multicultural counseling as a specialty and two who were generalist. Without being aware of the PAR training model, all evaluators unknowingly selected the post-training transcript as indicative of the most effective counseling on 20 of the 24

pairs. Additional research is certainly warranted that would examine the influence of training on client's perceptions of counseling effectiveness.

Limitations of the Model

The PAR Model does not overtly assume a position of social change or social consciousness and may leave the client with the belief that there is no right way of being. The assumption that generating multiple perspectives and multiple responses to life dilemmas across the four domains will automatically move clients to become more socially responsible for self, for others, and for self in relationship to others may be faulty. It seems to be based on the belief that if one truly sees themselves as someone who does not care about others nor about self in relationship to others, then they might be more apt to alter their behaviors. However, this is never spoken. It is the silence that can be dangerous.

Second, clients who are not verbal and who are in crisis may not be as patient with the process. They may wish to receive an answer to their problem immediately without a reference to how they can to be in the situation, nor a wish to understand how their need influences others.

Third, clients who have more of an internal locus of responsibility or locus of control may also resist this form of therapy, given that the emphasis tends to be more relational in nature. This may be particularly true for clients who see themselves as having no group identity and whose support network consists of others who are equally as individualistic.

Fourth, though not mentioned within the text addressing the important of a discussion of the culture of counseling, it would appear critical that the legal ethical guidelines be presented in detail so as not to confuse the client about his or her rights to be anything that they wish to be or wish to do. There are some negative ethical-legal consequences that the counselor might experience if these are not noted.

References

Steward, R.J., Gimenez, M.M., & Jackson, J.D. (1995). The study of personal preferences of successful university students as related to race/ethnicity, and sex: Implications and recommendations for training, practice, and future research. Journal of College Student Development, 36, 123-131.